



Municipality of Anchorage

3000 Arctic Blvd • Anchorage, Alaska 99503-3898 • Telephone (907) 564-2799 • Fax (907) 786-5681
<http://www.muni.org> • <http://www.awwu.biz>



Mayor Dan Sullivan

Anchorage Water & Wastewater Utility

Board Chair Tim Sullivan

September 10, 2014

Director, Office of Water
U.S. Environmental Protection Agency, Region 10
NPDES Compliance Unit
1200 Sixth Avenue, OW-133
Seattle, Washington 98101

Subject: Whole Effluent Toxicity Testing Results
3rd Quarter 2014
NPDES Permit No. AK-002255-1

The John M. Asplund Water Pollution Control Facility permit requires that quarterly whole effluent toxicity (WET) testing reports be submitted with the discharge monitoring report (DMR) for the month following the test month. The enclosed report outlines test results for the short-term chronic toxicity test conducted for the third quarter of 2014 (24-hour composite sample collected August 4th, 2014). Effluent flow on the sampling day for this WET test sample was 28.21 MGD.

The permit requires that testing continue with the most sensitive species after an annual screening using three species. This quarter's test used the most sensitive species as demonstrated by the screening of all three species in first quarter 2014. The WET testing consisted of a fertilization test using the purple sea urchin (*Strongylocentrotus purpuratus*). The permit toxicity trigger of 143TUc was not exceeded in this test with a reported chronic toxicity of 71.4 TUc.

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

I can be contacted at (907) 564-2799 or <mailto:David.Persinger@awwu.biz> should you have any questions.

Sincerely,

David Persinger, P.E.
Director, Treatment Division - AWWU

Cc: Alaska Department of Environmental Conservation, Division of Water
Rob Gustafson, Water Quality Supervisor, AWWU
Jeff Axman, Acting Superintendent, John M. Asplund WPCF, AWWU

Enclosure: Pacific EcoRisk, WET test report

Community, Security, Prosperity

PERMITTEE NAME/ADDRESS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
CMB No. 2040-0004

NAME: ANCHORAGE, MUNICIPALITY OF
ADDRESS: 3000 ARCTIC BLVD.
ANCHORAGE, AK 99503-3998

AK0022551
PERMIT NUMBER

001 A
DISCHARGE NUMBER

DMR MAILING ZIP CODE: 99503

MAJOR

(SUBRC2)

External Outfall

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form

FACILITY: JOHN M. ASPLUND WWTF----301 (H)

LOCATION: ANCHORAGE AK 99502

ATTN: J. Brett Jokela, P.E., GENERAL MGR. AWWU

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
14	08	01	14	08	31

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
CHLORINE, TOTAL RESIDUAL 50060 1 0 0	SAMPLE MEASUREMENT	*****	*****	***	*****	*****	0.9	MG/L	0	EVERY 3 HRS	GRAB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	1.2 DAILY MX			EVERY 4 HRS	GRAB
BOD, 5-DAY PERCENT REMOVAL 81010 K 0 0	SAMPLE MEASUREMENT	*****	*****	***	44	*****	*****	%	N/A	Monthly	CALCTD
PERCENT REMOVAL SOLIDS, SUSPENDED REMOVAL 81011 K 0 0	PERMIT REQUIREMENT	*****	*****	***	REPORT MO AVG	*****	*****			Monthly	CALCTD
PERCENT REMOVAL	SAMPLE MEASUREMENT	*****	*****	***	79	*****	*****	%	N/A	Monthly	CALCTD
	PERMIT REQUIREMENT	*****	*****	***	REPORT MO AVG	*****	*****			Monthly	CALCTD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICIAL

David Persinger, P.E.
Director, Treatment Division

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

907 564-2799 14 09 10
AREA CODE NUMBER YEAR MONTH DAY

COMMENT AND EXPANATION OF ANY VIOLATIONS (Reference all attachments here)

Whole Effluent Toxicity (WET) testing was completed on the 24 hour effluent composite sample for August 4th, 2014. See attached letter of explanation and WET report for specific details regarding this test

Gary Lawley
 Kinnetic Laboratories, Inc.
 1102 West 7th Avenue
 Anchorage, AK 99501

August 17, 2014

Gary,


I have enclosed our report "NPDES Compliance Toxicity Testing of the City of Anchorage John M. Asplund Water Pollution Control Facility Effluent". This evaluation consisted of performing the US EPA echinoderm sperm fertilization chronic toxicity test with the purple urchin, *Strongylocentrotus purpuratus*, using an effluent sample collected August 4, 2014. A summary of the results of this testing follows:

Chronic Effects of Anchorage Effluent on Purple Urchin Sperm Fertilization

There were significant reductions in echinoderm sperm fertilization at the 2.8% effluent concentration; the NOEC was 1.4% effluent, resulting in 71.4 TUc.

If you have any questions regarding the performance and interpretation of this test, please contact my colleagues Dr. Scott Ogle or Alison Briden at (707) 207-7760.

Sincerely,

 Stevi Vasquez
 2014.08.18
 12:41:24 -08'00'

Stevi Vasquez
 Aquatic Ecotoxicologist



Pacific EcoRisk is accredited in accordance with NELAP (ORELAP ID 4043). Pacific EcoRisk certifies that the test results reported herein conform to the most current NELAP requirements for parameters for which accreditation is required and available. Any exceptions to NELAP requirements are noted, where applicable, in the body of the report. This report shall not be reproduced, except in full, without the written consent of Pacific EcoRisk. This testing was performed under Lab Order 22844.

English

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Tracking Number: 70113500000190248917

Expected Delivery Day: **Monday, September 15, 2014**

Product & Tracking Information

Postal Product:
First-Class Mail®Features:
Certified Mail™

Return Receipt

DATE & TIME	STATUS/ITEM	LOCATION
September 12, 2014, 12:24 pm	Delivered	SEATTLE, WA 98101
Your item was delivered at 12:24 pm on September 12, 2014 in Seattle, WA 98101.		
September 12, 2014, 7:16 am	Departed USPS Facility	SEATTLE, WA 98108
September 11, 2014, 6:33 pm	Arrived at USPS Facility	SEATTLE, WA 98108
September 11, 2014, 2:04 am	Departed USPS Facility	ANCHORAGE, AK 995
September 10, 2014, 9:21 pm	Arrived at USPS Origin Facility	ANCHORAGE, AK 995
September 10, 2014, 6:25 pm	Departed Post Office	ANCHORAGE, AK 995
September 10, 2014, 4:20 pm	Acceptance	ANCHORAGE, AK 995

Available Actions

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)
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OFFICIAL USE

Postage	\$ 35.00
Certified Fee	\$ 3.00
Return Receipt Fee (Endorsement Required)	\$ 2.00
Restricted Delivery Fee (Endorsement Required)	\$ 0.00
Total Postage & Fees	\$ 40.00



Sent To
 Street, Apt. No.,
 or PO Box No.
 City, State, ZIP+4

U.S. EPA, Region 10
Attn: OCE-133
1200 Sixth Avenue, Suite 900
Seattle, WA 98101

PS Form 3800, August 2006 See Reverse for Instructions

Track Another Package

Tracking (or receipt) number

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

U.S. EPA, Region 10
Attn: OCE-133
1200 Sixth Avenue, Suite 900
Seattle, WA 98101

2. Article Number
 (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) ☒ Yes ☐ No

C. Date of Delivery

D. Is delivery address different from item 1? ☒ Yes ☐ No

If YES, enter delivery address below:

3. Service Type

☒ Certified Mail ☐ Express Mail

☐ Registered ☐ Return Receipt for Merchandise

☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

7011 3500 0001 9024 8917

English

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Customer Service

Have questions? We're here to help.

Tracking Number: 7011350000190248931

On Time

Expected Delivery Day: Thursday, September 11, 2014

Product & Tracking Information

Postal Product:
First-Class Mail®Features:
Certified Mail™

Return Receipt

DATE/TIME	STATUS/DETAIL	LOCATION
September 11, 2014, 10:49 am	Delivered	ANCHORAGE, AK 995
September 11, 2014, 7:14 am	Arrived at Unit	ANCHORAGE, AK 995
September 11, 2014, 2:07 am	Departed USPS Origin Facility	ANCHORAGE, AK 995
September 10, 2014, 9:21 pm	Arrived at USPS Origin Facility	ANCHORAGE, AK 995
September 10, 2014, 6:25 pm	Departed Post Office	ANCHORAGE, AK 995
September 10, 2014, 4:22 pm	Acceptance	ANCHORAGE, AK 995

Available Actions

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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Postage	\$ 12.03
Certified Fee	\$ 3.70
Return Receipt Fee (Endorsement Required)	\$ 2.70
Restricted Delivery Fee (Endorsement Required)	\$ 10.00
Total Postage & Fees	\$ 28.43
Sent To: Ak Dept of Environmental Conservation Attn: Sherry Holm Division of Water 555 Cordova Street Anchorage, AK 99501	
PS Form 3800, August 2008 See Reverse for Instructions	

Track Another Package

Tracking (or receipt) number

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Ak Dept of Environmental Conservation
 Attn: Sherry Holm
 Division of Water
 555 Cordova Street
 Anchorage, AK 99501

 2. Article Number
 (Transfer from service label)

7011 3500 0001 9024 8931

COMPLETE THIS SECTION ON DELIVERY

A. Signature X <i>[Signature]</i>		<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee
B. Received by (Printed Name) <i>E. B. Burrell</i>		C. Date of Delivery <i>9/11/14</i>
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No		
3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.		
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes		

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